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DENBIGHSHIRE EDUCATION COMMITTEE



ANNUAL REPORT

of the

School Medical Officer

for the year

1951

M. T. ISLWYN JONES, M.D., D.P.H.,

School Medical Officer.

FOREWORD.

While this is the second Annual Report on the School Health Service for me to present, it will be the first occasion upon which I am in a position to review a whole year's work.

The year 1951 has been, especially for the school medical staff, even of greater activity than suggested by the statistics. With new appointments and re-allocation of duties, a great deal of administrative changes have been instituted which, I am confident, will form a firm foundation for future development. The County has been divided into four districts, each the responsibility of a whole-time Medical Officer of Health who is also partly employed by the County Council. Synchronised with these changes there has been a re-grouping of schools so that each of these Medical Officers, as far as possible, is responsible for the schools within his or her area, thus ensuring co-ordination of all health services and minimising travelling.

To benefit fully from the resources of the School Health Service, I consider it essential that there should be a close liaison between the professional and administrative staff and with this objective in mind, a School Health Clerical Section was constituted. With the transfer of the various clinics from No. 16 to No. 1 Grosvenor Road, Wrexham, it became possible to accommodate the entire section as a cohesive unit in the vacated ground floor rooms. Already, I am pleased to report, the anticipated results are well on the way to being fulfilled as most of the County has been re-organised and it is hoped to complete the procedure on the appointment of new staff.

The Chief Administrative Officer, the late Mr. J. T. Pritchard, was amongst those of the staff who worked indefatigably in re-planning the School Health Service and it was particularly mortifying that he was unable to supervise the re-organisation to completion nor to survive to enjoy the leisure of retirement after having rendered 40 years of devoted and valuable service to the County.

Handicapped pupils were given greater attention and closer surveillance. Discussions have taken place regarding the Child Guidance Clinics and provision of Special Schools. The appointment of an Ophthalmologist was agreed to, while in conjunction with Flintshire unsuccessful endeavours were made to obtain the services of a Speech Therapist. The need for these facilities is amply evident from a study of the statistics.

Finally, I am glad of this opportunity to acknowledge my gratitude to the Chairman and Education Committee for their unremitting assistance to improve the health of the school child, to the Director of Education and Head Teachers for continued co-operation; and finally to the professional and clerical staff of this department who have borne the burden of the day and have responded so well to heavy demands.

STAFF.

Medical.

County Medical Officer and School Medical Officer:

Dr. M. T. Islwyn Jones, M.D., D.P.H.

Deputy County Medical Officer:

Dr. T. Kendrick Hughes, M.B., Ch.B., D.P.H.

District Medical Officers of Health and School Medical Officers:

Western No. 1:

Dr. Wm. McKendrick, M.D., D.P.H.

Western No. 2:

Dr. M. Jones Roberts, M.B., Ch.B., D.P.H.

Eastern No. 1:

Dr. S. Ball, M.B., M.R.C.S., D.P.H. (Resigned
31/10/51).

Eastern No. 2:

Dr. T. P. Edwards, M.D., B.S., D.P.H.

Assistant School Medical Officers:

Dr. Sybil O. Edwards, M.B., Ch.B., D.P.H.

Dr. Audrey A. Shone, M.B., Ch.B. (Appointed 2/8/51).

Child Guidance Clinics.

Psychiatrist:

Dr. E. Simmons, North Wales Hospital for Mental Diseases, Denbigh (Visiting Specialist).

Psychologist:

Miss Martha Vidor, Ph.D. (Leipzig).

Dental.

Chief Dental Officer:

Mr. D. Glen Thomson, T.D., L.D.S., R.C.S. (Eng.).

Assistant Dental Officers:

Mr. J. G. Roberts, L.D.S.

Mr. H. E. Fussell, L.D.S.

Mr. R. A. Rider (Resigned 31/5/51).

Nursing.

Superintendent Nursing Officer:

Miss W. M. Chune.

Deputy Superintendent Nursing Officer:

Miss Eirlys Jones.

School Nurses (apportionment of time—one half as School Nurse and one half as Health Visitor):

Miss K. Jones.

Miss C. J. Thomas (Resigned 30/9/51).

Miss E. A. Bodsworth.

Miss M. E. Jones.

Miss E. Griffiths.

Miss M. D. Evans.

Miss E. A. Beech.

Miss S. C. Evans (H.V. Course, September, 1951).

Miss M. Irons (Resigned 20/7/51).

Miss C. E. Davies (Appointed October, 1951).

Mrs. E. G. E. Rees.

Mrs. I. E. Garner.

Mrs. M. Williams.

Miss E. B. Jones.

Mrs. A. E. Jones (Appointed November, 1951).

Full-time School Nurses:

Mrs. A. Martin.

Mrs. L. Warne.

Dental Attendants:

Mrs. M. Jarvis.

Miss I. M. A. Lee.

Miss E. Bellis.

Miss I. E. Sanderson.

ADMINISTRATION.**Assistant Administrative Officer:**

Mr. J. T. Pritchard (Died 24/11/51).

Deputy Assistant Administrative Officer:

Mr. T. J. Davies.

School Health Section:**Senior Section Clerk:**

Mr. J. E. Evans.

Assistant Clerks:

Mr. I. W. Jones, Miss M. M. Parry, Miss B. Bailey (resigned 30/9/51), Miss A. Cudworth, Mrs. R. Gray and Mrs. G. Storrs (Colwyn Bay Office).

REPORT FOR THE YEAR 1951.

General Statistics.

Population of County (Census, 1951)	170699
Area of County	427977 acres
School Child Population	25611

Registration details on 31st December, 1951 were as follows:—

School Departments.	No. of Schools.	No. of Pupils on Registers
Primary	168	18011
Secondary Modern ...	13	3571
Secondary Grammar	10	3861
Secondary Technical .	1	121
Specials	2	47
Total	194	25611
Average attendance during year		88%

Staff.

The staff of the School Health Service during 1951 was as follows :—

	1st January.	31st December.
School Medical Officer	1	1
Deputy School Medical Officer	1	0
Assistant Medical Officers (whole-time)	2	2
District Medical Officers and Assistant Medical Officers	2	4
Dental Officers	4	3
Dental Attendants	4	4
Whole-time School Nurses	2	2
Health Visitors/School Nurses	11	12

During the year, Dr. Kendrick Hughes was appointed District Medical Officer of Health to Eastern No. 1 District and since then he has performed the additional duties of that post while retaining many of the responsibilities of the Deputy School Medical Officer. It would not have been possible to have accomplished so much without his ready and full co-operation.

Dr. M. Jones Roberts was appointed District Medical Officer of Health of Western No. 2 District and since the 1st May, only 50 per cent. of her services have been at the disposal of the County Council.

Dr. Audrey Shone commenced duties on 24th September as Assistant Medical Officer based on Denbigh, but due to vacancies it has been necessary for her area to be extended to the vicinity of Wrexham.

Dr. S. Ball was appointed on 9th April as District Medical Officer of Eastern No. 1 District and resigned on 31st October to take up duties with the Manchester Regional Hospital Board.

Mr. R. A. Rider, Assistant Dental Officer resigned on 31st May, 1951; a further loss to an already depleted dental staff. It has been quite impossible to obtain any replacements.

Miss Irons, Health Visitor/School Nurse was appointed on 3rd February and resigned, due to ill health on 20th July, 1951.

Miss C. J. Thomas, Health Visitor/School Nurse retired on 31st October, 1951 after 23 years of service with the Denbighshire County Council.

Mr. I. W. Jones was appointed as Clerk in the School Health Section on 7th August, 1951 and Miss B. Bailey resigned on 30th September, 1951.

MEDICAL INSPECTION.

No changes were made during the year with regard to the age groups for medical inspections. According to the present arrangements, school children are examined as follows :—

Group.	Age when inspected.	Schools concerned.
Entrants.	As soon as possible after admission.	Primary Infants.
Second Age Group.	During the last year of attendance at a Junior School.	Primary Junior.
Third Age Group.	During the last year of attendance at:	
	(a) Primary or Modern Secondary Schools (14+).	Secondary Modern.
	(b) Secondary Grammar Schools (15+).	Secondary Grammar.
Specials.	On request from Nurses, Teachers and Parents.	All Schools.

The number of children examined at the routine medical inspections during the year was 6,357, as compared with 8,706 in 1950.

These age groups are as follows :—

Entrants	2478
Second Age Group	2438
Third Age Group	1371
Other periodic inspections	70
Total	6357

In addition to the above, 260 Special Inspections and 970 re-examinations were carried out by the Assistant Medical Officers.

Some remote rural schools have only a few entrants each year. As there are no other schools within a reasonable distance it has been found impossible to combine such schools for one session and, in order to justify the visit of a Medical Officer, it was decided that all pupils should be examined each year.

The Local Education Authority is empowered under the Education Act, 1944 to provide for the medical inspection of all pupils in attendance at schools maintained by them, including pupils in attendance at County Colleges and this enactment makes it obligatory upon the parents to submit their child for inspection when required to do so by an authorised officer of the Local Education Authority. These facts are not universally known by parents and consequently, occasionally, consent is withheld, but so far even the most recalcitrant parent has withdrawn objections on being informed of the purpose of the examination and an explanation of the legal necessity. Some of the children of this group are in particular need of a medical examination and it is as well that compulsory powers are available in such circumstances.

While the principle of conducting all routine medical inspections on school premises is most commendable it would appear to be an unfortunate one when conditions at a school are not conducive to a thorough and comprehensive examination. Especially is this the case where there is a well equipped and commodious clinic in the vicinity. The accommodation available in some schools is quite unsuitable for a medical examination both from the viewpoint of the pupil and the Medical Officer. I regret that even some of the new schools, completed in recent years, have no Medical Inspection room. While not wishing to have rooms reserved entirely for medical inspection purposes it would facilitate the work if such accommodation could be earmarked for this purpose so that, while used mainly for school purposes, it would invariably be at the disposal of the School Health Service.

School Medical Cards.

In the past school medical cards were kept at the school, while copies were retained at the office. This system involved

much clerical duplication while many head-teachers found the responsibility of storing the cards rather inconvenient. Pupils move from school to school and unless the card is passed on, at the next medical examination, a new card would have to be prepared. If there had been several moves, the one pupil might have several medical cards, each recording the results of one examination.

To avoid duplication and the incomplete recording, I have arranged for all medical cards throughout the county to be stored at the central office, and only the subsidiary medical card being left at the school. In this way, it is hoped to observe strictly the confidential nature of this medical document while leaving all relevant and necessary information required by the headteacher on the subsidiary medical card.

Most of the county has been re-organised on these lines and I am grateful to the headteachers for their ready response to my requests for information and assistance.

FINDINGS OF MEDICAL INSPECTIONS.

At the periodic medical inspection of 6,357 pupils, 526 were found to have 590 defects needing treatment, while 3,381 defects were noted for observation. The total number of pupils requiring treatment for defective vision was 230, which far exceeded all other defects. There was an appreciable decrease in the number of Ear, Nose and Throat defects requiring treatment which may be accounted for by the more conservative attitude towards tonsillectomy.

The high incidence of defective vision requiring treatment further aggravated the critical position at the hospital Ophthalmic Clinics and there was permanently a waiting list of about 70 children. The importance of early treatment for a school child is obvious and as this could not be obtained satisfactorily, especially for rural children, it was decided to employ a part-time Ophthalmologist.

Cleanliness.

School Nurses inspect children at schools in their areas at least once a term. The number of children found at these inspections to be verminous was 1,021.

The incidence of infestation is not high and if it were possible to eradicate vermin from a few families the numbers would diminish considerably. The debilitating effects of these parasites are little appreciated by the type of parent whose child chronically harbours them. While the Education Act empowers prosecution of persistent offenders no cases of such severity were encountered and proceedings were not instituted. It is only rarely that children are found in such a dirty and neglected condition that more than a few instructions from the School Nurse are needed, but whenever the interests of the child demands further surveillance, the assistance of the N.S.P.C.C. Inspectors and the School Attendance Officers is readily available.

General Condition.

The classification of children, while based on physical findings, is to some extent a subjective rather than objective process and consequently there is some variation between the results of different Medical Officers. Although this thorny problem has been discussed on several occasions and guidance given in the Annual Report of the Chief Medical Officer to the Ministry of Education, it has not been possible to attain a uniform standard.

Comparative classification of pupils examined at routine inspections during 1950 and 1951 is shown in the following table :—

Age Groups.	A Good		B Fair		C Poor		No. of pupils Examined	
	1950	1951	1950	1951	1950	1951	1950	1951
Entrants .	693	464	2254	1888	116	70	3063	2422
Second Age Group .	525	711	1245	1665	20	47	1790	2423
Third Age Group .	920	269	2667	1161	7	12	3594	1442
Other Peri- iodic In- spections	101	23	145	43	13	4	259	70
Total	2239	1467	6311	4757	156	133	8706	6357

ARRANGEMENTS FOR MEDICAL TREATMENT.

Certain treatment of school children found to be defective is undertaken at the following School Clinics :—

16, Grosvenor Road, Wrexham.

1, Grosvenor Road, Wrexham.

Nant-y-Glyn Road Clinic, Colwyn Bay.

Plas-yn-Rhos, Rhos.

County Clinic, Well Street, Cefn.

County Clinic, Gwersyllt.

Watling Street County Clinic, Llanrwst.

County Clinic, Middle Lane, Denbigh.

Welfare House, Llangollen.

The Nursery, Llay.

Pupils found to require surveillance or treatment are notified to the School Medical Officer who then proceeds to make the necessary arrangements. A cordial relationship exists between the general practitioner and the School Health Service, which has been fostered by personal contact, and the recognition of a mutual purpose in promoting the improvement of the health of the child. The majority of doctors prefer that the School Health Service should make any necessary specialist appointments recommended by the Assistant Medical Officers, on the understanding that a copy of the Specialists' reports are forwarded immediately. Such an arrangement has operated extremely well and has obviated delays and needless correspondence.

The School Health Service is also much indebted to the Specialist staff of the hospitals, not only for their readiness to examine pupils, but for the full reports on all school children treated by them as in-patients as well as out-patients.

Minor Ailments.

When the National Health Service Act was passed it appeared at first as if the need for school clinics had come to an end, but experience has proved otherwise. The standard and regularity of treatment at the Minor Ailments Clinics are generally so much better than the child obtains at home that a heavy demand still exists.

Defective Vision.

During the year only two Medical Officers held Ophthalmic Clinics, whereas the remainder merely conducted the preliminary tests prior to referring the child to the Hospital Ophthalmic Out-patients Department. In view of the delay before a school child could be seen and the great difficulty in arranging for children from distant homes to attend at 9 a.m., it was decided that the best interests of the children would be served by appointing an appropriately qualified Ophthalmologist on a part-time basis, to function in the various school clinics throughout the County. By arranging more convenient times and centres it will be feasible for every child to receive expert attention promptly and effectively.

Ear, Nose and Throat Clinics.

The Local Education Authority is no longer responsible for any Ear, Nose and Throat Clinics. All children are referred to the Hospitals Out-patients Department and in the Wrexham Area a School Nurse attends the sessions. Tonsillectomy is by dissection only and the number operated upon per session has decreased accordingly, but a more conservative attitude has resulted in a proportional reduction in the number needing operation so that there is not a long waiting list.

It is unfortunate that in the Western part of the County children from the Llanrwst and Colwyn Bay area have to be sent to Rhyl or Denbigh for this operation, whereas previously these operations took place at the School Clinics at Llanrwst and Colwyn Bay.

Orthopaedic Clinics.

Orthopaedic Clinics are held at Wrexham, Rhos, Cefn, Colwyn Bay and Denbigh and the following are particulars of children who attended at these clinics.

Clinic	No. of Children Attended
Cefn	118
Rhos	218
Wrexham	380
Colwyn Bay	116
Denbigh	226
Llanrwst	84
Total	1142

Total number treated as in-patients : 59.

Diphtheria Immunisation.

A high percentage of infants are immunised against Diphtheria and gradually parents are becoming aware of the need for a "booster" dose at the age of 4 to 5 years if adequate immunity is to be maintained.

Every effort is made to immunise children in their fourth year, but if they have escaped the net, then, with the co-operation of the school staff, most parents accept the advice to have their children immunised. As A.P.T. is inclined to cause undesirable reaction in older children, all school children are given T.A.F., which also produces an adequate immunity.

Infectious Diseases.

There have been small outbreaks of Measles and Whooping Cough during the past year, and the advice of the Department has been sought on numerous occasions. Parents

are too inclined to treat Whooping Cough lightly and not to observe the strict rules of isolation. Infants are now being immunised against Whooping Cough and it is to be hoped that this will reduce the incidence in due course.

Headteachers frequently report cases of non-notifiable diseases amongst their pupils and these are followed up by the School Nurses who advise on isolation and disinfection.

Mass Radiography.

Again this year the Welsh Regional Hospital Board Mass Radiography Unit visited the county to examine school children in the 14+ age group. The policy of concentrating on this group is justified by the fact that there is not such a great incidence of Pulmonary Tuberculosis in the younger age groups as at this age. It is therefore wise to concentrate resources on the 14+ group so that as many children as possible are examined before leaving the sphere of interest of the School Health Service.

The results obtained have been, on the whole, most satisfactory. Practically without exception parents have consented, in writing, to this examination.

The scope of the work has been extended to include the general population and there has been a very satisfactory response. Some have been referred for further investigation, occasionally, resulting in an early diagnosis of Pulmonary Tuberculosis which, in the case of certain groups who are in constant contact with children, not only ensures an early recovery but also minimises spread of infection.

MASS RADIOGRAPHY SURVEY OF DENBIGHSHIRE SCHOOL CHILDREN, 1951.

DETAILS OF INDIVIDUAL SCHOOLS

School	Total No. Examined.		Total No. Abnormal.		Definite P.T.		Needing further observation for P.T.		Other abnormalities of the chest.	
	Total	M. F.	Total	M. F.	Total	M. F.	Total	M. F.	Total	M. F.
Colwyn Bay Grammar School	184	91	93	2	—	—	1	—	1	—
Colwyn Bay Secondary Modern ...	155	84	71	1	—	—	—	—	2	1
Colwyn Bay, Lyndon Secondary ...	2	—	2	—	—	—	—	—	—	—
Colwyn Bay, Mochdre Infants'	1	—	1	—	—	—	—	—	—	—
Colwyn Bay, Argyle House	2	—	2	—	—	—	—	—	—	—
Abergele Secondary Modern	39	17	22	—	—	—	—	—	—	—
Abergele Grammar	127	58	69	2	—	—	—	—	—	—
Denbigh Grammar	106	39	67	1	—	—	1	—	3	2
Denbigh Secondary Modern	97	52	45	2	—	—	—	—	1	—
Ruthin Grammar	37	18	19	—	—	—	—	—	2	2
Ruthin Council	10	8	2	1	—	—	—	—	—	—
Brynhyfryd Grammar (Ruthin)	117	43	74	—	—	—	—	—	1	—
Borthlyn N.P.	15	7	8	2	—	—	2	1	—	—
Llanrwst Secondary Modern	62	34	28	3	—	—	1	1	—	—
Llanrwst Grammar	153	72	81	—	—	—	—	—	2	—
TOTALS	1107	523	584	17	8	9	5	2	12	6
Staff	14	8	6	—	—	—	—	—	—	—

Employment of Children.

The Education Act, 1944 (Section 59) provides that, if in the opinion of the Local Education Authority any pupil is being employed in a manner likely to be prejudicial to his health or to render him unfit to obtain the full benefit of the education provided for him, the Authority may prohibit, or impose such restrictions on his employment, as they consider necessary in the interests of the child.

Pupils employed are examined initially and at periodic intervals, cognisance being taken of the age, hours, type of work and the condition of the pupil.

Mostly, pupils are referred by their prospective employers and the head teachers.

Total number examined in 1951	170
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Total number not considered fit	—
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Supply of Milk.

Free milk is supplied in all schools. During the year I have expressed my views on this subject several times. It is vital that the primary emphasis should be on the **safety** of the milk given to the school child. At the present time I cannot accept, with implicit faith, the guarantee that even Tuberculin Tested milk is invariably free from tuberculosis as, periodically, there does occur a breakdown amongst long established T.T. herds and it is vital to guard the school children against such a contingency.

No. of Schools supplied with milk :—

Pasteurised	182
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Tuberculin Tested	11
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Dried Milk	1
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Accredited	—
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Non-designated	—
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Provision of Meals.

Taking into consideration that the School Meals Service feeds far greater numbers than any other individual concern within the County, it reflects credit on all associated with it that there has not been a single case of food poisoning in any school.

One incident was investigated but the information obtained contradicted any suggestion that the symptoms of some of the pupils could have been caused by what they had eaten at school, but rather suggested that it was associated with an infection which seemed prevalent in some homes in that area.

While some canteens have modern equipment some are not so fortunate. In the more antiquated canteens constant vigilance has to be maintained in kitchen technique and personal hygiene, for otherwise, conditions are somewhat conducive to the spread of infection. The staff are fully conscious of this risk and do their utmost to minimise it. The Schools Meals Organiser by precept and tuition—a special holiday course was held for all cooks in the county—has done everything possible to stress the importance of this aspect of the staffs' responsibilities.

A daily average number of children in the primary, secondary and grammar schools who received meals during the year was 13,789.

All staff are appointed subject to medical examination but periodically some are referred for re-examination. This, if facilities permit, should resolve into an annual re-examination of all canteen staff.

Handicapped Pupils.

The special requirements of the less fortunate school children were legislated for in the Education Act, 1944 and more precisely by the Handicapped Pupils and School Health Service Regulations, 1945. These provisions gave powers to Local Education Authorities to provide special educational treatment for all children classified as Handicapped.

The problems of this group are varied and intricate and the utmost care and consideration has to be given to each individual case, but it would appear to the examining Medical Officer rather pointless, to apply time and energy to a detailed examination, unless there are some prospects of his recommendations being implemented.

As indicated in the previous report there are but scant provisions for these groups in the county and it is exceedingly difficult to obtain vacancies for some categories of Handicapped Pupils. It was with great expectations that realistic figures were prepared when discussions were entered into with other North Wales Authorities with a view to obtaining premises for a Residential School for Physically Handicapped Pupils.

Particular difficulty has been met in placing children with more than one handicap and unfortunately there does not seem to be any satisfactory solution to some of the problems.

All the pupils attending the Alexandra Special School, Wrexham, were re-examined. Two pupils were recommended to be excluded and one pupil was reported to the Mental Deficiency Authority. Five Medical Officers have been approved by the Ministry of Education for the ascertainment of Educationally Subnormal children. Dr. T. K. Hughes attended a revision course during the year and is now undertaking most of this work in the Eastern part of the county.

Maladjusted children are usually referred to the Child Guidance Clinic for further opinion. While many problems can be adjusted by the Psychiatrist and his staff it is found that vacancies for those recommended for a special school are nearly impossible to obtain.

The Child Guidance Clinic Team is provided by the North Wales Mental Hospital Management Committee and operates at various Local Education Authorities' Clinics. As no Child Guidance Centre existed the Child Guidance Clinic Team accepted the dual role and dealt with cases that strictly should have been referred to a Child Guidance Centre. Discussions have occurred with a view to delineating responsibility and to the further development of this service along the trends indicated by past experience.

Speech Defect.

The disability of a child with a Speech Defect is so manifest that it was no surprise to find strong support to the proposal that the services of a Speech Therapist should be obtained for the County. The initiative and enthusiasm of certain members of the Education Committee resulted in a Joint Meeting with Flintshire when it was resolved that the two counties should, initially, share the services of a Therapist.

The post has been advertised on more than one occasion but unfortunately no applications were received.

Hygiene of Schools.

The Assistant School Medical Officers have been instructed to periodically inspect the school premises when there to conduct Routine Medical Inspections. The information so far available suggests that some of the old schools do not conform with present day standards. It is invidious for an authority which is responsible for Health Education to instruct others while permitting pupils to be educated under such poor conditions.

I have personally inspected some schools and have been appalled at the primitive conditions existing and the complete disregard of the elementary principles of hygiene.

At the request of the Headmistress I inspected the Ruabon Grammar School for Girls and it was evident that there was an urgent need for better premises.

To obtain an accurate assessment of the conditions prevailing in the schools of the county, it has been arranged for a complete survey to be carried out by the County Sanitary Officer. Periodic reports will be submitted.

Children's Homes.

In conjunction with the Children's Officer arrangements were made for the routine medical inspection of children at the various Children's Homes by the Assistant Medical Officers. The Dental Officer also attends for the examination and treatment of these children during school holidays.

According to the reports, the health and dental condition of the children at the Homes are as good, if not better, than the average school child.

School Dental Service.

Denbighshire, like many other authorities has not been able to appoint Dental Officers to its staff, although the vacancies have been advertised on more than one occasion. In fact, the position was further aggravated by the resignation of Mr. Rider in May, 1951.

No effort has been spared to give the school children the dental treatment needed, but, although the amount of work done by each dental officer compares very favourably with those of other authorities, it is quite impossible for three dental officers to do the work of seven.

A study of the following report from the Senior Dental Officer, Mr. D. Glen Thomson, demonstrates the industry of the Dental Staff :—

“The deterioration which has taken place in the School Dental Service continues and will not be arrested until the dental staff is up to establishment. It has not been possible to obtain additional dental officers during the year and another dental officer, Mr. Rider, resigned and entered private practice. In the majority of cases private practitioners have been unable to provide emergency treatment of school children and the preventative treatment by the School Dental Service has to a very large extent been foregone and concentrated on the relief of pain and sepsis. Many children attending Schools in Denbighshire whose welfare is provided for in all other directions must suffer as a result of dental neglect. It is very disturbing to contemplate this continued dental deterioration when the school child should be receiving the highest priority in the National Dental Service.

The increase in dental caries found in the younger age groups may be due to several causes. Dental hygiene is not practised as a routine measure and again the shortage of Dental Staff precludes the provision of talks, lectures and instructions in oral hygiene. The cost of a new tooth brush may be a deterrent in cleaning teeth. They vary in price from 1/6d. upwards; indeed, until recently there was a pur-

chase tax of $33\frac{1}{3}$ per cent. During the war years there was a definite improvement in the teeth of younger children, and it is very probable the shortage of sweet had a beneficial effect on the teeth. The diet often contains too little fresh fruit, and possibly the high cost has a bearing on the quantity given to children. The latest research on dental caries points out the very valuable contribution fruit can render as a cleansing aid and it would be a tremendous help if even only half an apple could be included in each meal provided by the School Service, and eaten at the end of the meal. Fluorine in drinking water has been universally accepted as beneficial to teeth and is said to reduce the incidence of caries. Some of the Rural areas of Denbighshire contain children with a very high standard of teeth and are comparatively immune from dental caries. It has been suggested that the water supply in these districts should undergo analysis, and the absence or presence of Fluorine determined. This will be carried out during the year and the findings given in the next annual report.

CLINICS.

Wrexham.

The Clinic at No. 1 Grosvenor Road, Wrexham, contains two surgeries, but only one has been equipped. When this room is used as a surgery portable equipment is installed. It was hoped that it would be fitted up during the past year with a pump chair, electric engine and fountain spittoon, but this was not proceeded with owing to the shortage of dental officers.

Colwyn Bay.

It is regretted that the proposed alterations in the rinsing room have not yet been carried out. The decoration of the surgery remains unsatisfactory and falls short of the standard pertaining to the other clinics in the County.

Llanrwst.

The clinic has been equipped with five point electric light, dental chair and spittoon. These items have been well used and are only intended as a temporary measure, when it is hoped that they will be replaced by new equipment.

Rural Schools.

The treatment of children attending Rural schools always presents difficulties, portable dental equipment is conveyed by the dental officers. A point of interest is that the weight of the equipment together with accessories is between 4 and 5 hundred-weight. The schools are often situated in hilly country with poor roads and rough surfaces entailing considerable wear on the car. The standard of equipment is excellent and a reasonable surgery can be set up with some ingenuity on the part of the dental nurse. When electricity is available the lighting difficulty is overcome by the use of a portable angle poise electric lamp, but the use is limited as there is no electricity in over 50 per cent. of the rural schools. The use of a van or truck to convey children from the rural schools to the central or permanent clinics would do much to overcome these conditions, and the treatment could be carried out under better conditions for both the operator and the patient.

Orthodontics.

The number of children offered this treatment has been limited owing to the shortage of dental officers. 36 orthodontic appliances were fitted during the year and 150 visits were made by children to have adjustments to the appliances. In every case movable appliances were used and very good results were obtained in the majority of cases. Many parents are anxious for their children to have irregular teeth corrected but unfortunately this branch of school dentistry must remain incomplete until the service attains its proper staff establishment.

Dentures.

Dentures are provided in most cases for children who have lost front teeth by accident or gross caries. 63 Dentures were inserted. Some unusual cases were treated during the year including a boy of 8 years with only four permanent molars remaining. All his deciduous teeth had been extracted by a private dentist. He presented an odd appearance and X-rays gave evidence that his permanent incisors were present but gave no sign of eruption. The lower molars were crowned to open the bite and part dentures supplied. This

changed his whole appearance, which became normal. In due course his permanent incisors erupted in good position to the relief and gratitude of the parents. There were several cases of children without teeth in the upper jaw who required full upper dentures.

Emergency Dental Clinics.

Clinics are held at Wrexham on Saturday mornings and Monday afternoons and additional clinics are held whenever they are required at Wrexham, Denbigh and Colwyn Bay.

Acceptance of Treatment.

The percentage of children accepting dental treatment in respect of the County is 84 per cent. The following schools provided 100 per cent. acceptances and where marked by asterisk obtained a hundred per cent. acceptance in 1950:—

Erbistock, *Isycoed, Llanelidan, Llanbedr, Llanarmon-yn-Ial, *Maengwynedd, *Minera, *Pandy Tudur, Penylan.

Owing to the shortage of staff 49 Primary Schools were not inspected during the year and a further 10 in the Borough of Wrexham, together with 4 Secondary Schools, a total of 63 schools. Inspections were carried out on school premises during school hours and 11,898 children were inspected in 116.5 sessions devoted to this work, an average of 102 children per session.

The co-operation of the Welsh Regional Hospital Board with the School Dental Service has brought a remarkable change in the service. Mr. Wynne Griffiths, Consultant Oral Surgeon to the Board has been most helpful, and full advantage of his services have been taken. Some examples of this work may be quoted.

Tongue Tie: These cases have been successfully operated upon and good results obtained .

Dental Cyst: A child attended the Clinic with a large dental cyst unnoticed by the parents. This was operated upon and a dental obturator inserted. The space has now closed with excellent result. Numerous cases of unerupted teeth

causing pain by pressure and impacted wisdom teeth were removed. Front teeth fractured by accident have had their pulp removed and crowned.

In conclusion, I would like to thank the dental staff, whose loyal co-operation has again been manifest. I would also like to pay tribute to the excellent co-operation afforded by the teaching staff throughout the County. Their help is invaluable and they can do much to bring this service to the school child. The clerical staff has been most helpful and their excellent help during the year is acknowledged.

Mr. J. G. Roberts, L.D.S., who is responsible for dental treatment of school children in the Wrexham Rural and Llansilin areas, states :—

“ In submitting my Annual Report for the year ending 1951 I find myself in some difficulty. As you are aware we have suffered further loss of staff and are now reduced to three. Under these circumstances we are limited to the choice of two lines of action; either we get out to do the greatest good for the greatest number or we give complete treatment to the favoured few. In deciding on the first course (of which I am in full agreement under the circumstances) I feel we are very likely to be misunderstood by the General Committee and I do wish they could be impressed by the fact that we are doing our best under very difficult and trying conditions. I also hope that during the coming year we may expect an increase in staff and would urge that every effort be exerted to secure this.”

Mr. H. E. Fussell, L.D.S., Assistant Dental Officer, who is responsible for dental treatment of school children in the Colwyn Bay, Llanrwst and Denbigh areas, states :—

“ The number of children examined, which included a substantial number aged 3 and 4 years, was in excess of 5,000, the figures having been given to you week by week. Consequently a large number of temporary teeth were saved by filling than any previous year, and this can only lead to a general improvement in the dentition of the children concerned, as well as lessen the number of orthodontic defect.

The percentage found to be in need of treatment was 56.5 which compares favourably with other parts of Great Britain, and certainly, as far as I am aware, with adjacent counties. Actually during 1951 89.1 per cent of the school population was examined and given the opportunity of treatment, and although a small proportion availed themselves of the facilities provided by the National Health Service there was an increase of 2 per cent, in the percentage of acceptances in the School Dental Service in this area."

Mr. Fussell in his report to me stressed the need for re-decoration at the Colwyn Bay Clinic. Although this has been under consideration for some time I can report that the County Architect is about to commence the work. Some old equipment which was considered to have some residual usefulness was transferred to Llanrwst Clinic. This it is hoped will be replaced in due course but in the meantime it will adequately serve the occasional use made of it. If additional staff is obtained the increased use of the Llanrwst Clinic will warrant the replacement of some of the equipment.

The appended Statistical Return will, I feel sure, be perused with much interest.

PRIMARY AND SECONDARY SCHOOLS.

Operations performed during the year comprised of :—

Amalgam Fillings	906
Amalgam and Cement Fillings	2303
Silicate Fillings	397
Permanent Teeth Extracted	1595
Temporary Teeth Extracted	11167
Impressions	67
Bites	4
Try Ins	23
Dentures Fitted	63
Adjustments to Dentures	3

Repairs to Dentures	4
Orthodontic Appliances Fitted	36
Adjustments to Orthodontic Appliances	150
Orthodontic Appliances Remade	2
Adjustments of Obturator	3
Oral Screens	2
Scalings	56
Fillings Polished	25
Sockets Syringed	4
Haemorrhage Arrested	12
Trimmings	6
Dressings	40
Crowns Fitted	2
Advice to Parents	171
Parents Attended	2018
Referred for X-ray	27
Referred to Hospital	19

TABLE GIVING THE INCIDENCE OF DENTAL CARIES IN THE FIVE YEAR OLD CHILD.

D. Decayed Teeth. M. Missing Teeth. F. Filled Teeth. .

Area.	Type of Area.	No. of children examined.	Average No. of "D.M.F." Deciduous Teeth per child.	% of children examined showing no "D.M.F." Deciduous Teeth (Sound).
Western Area No. 1:				
Abergele U.D., Colwyn Bay Borough, Aled	Residential and Agricultural	132	4.2	32.3 per cent
Western Area No. 2:				
Denbigh, Hiraethog, Llanrwst, Ruthin Borough, Ruthin Rural	Urban and Agricultural	246	3.7	24.3 per cent
Eastern Area No. 1:				
Ceiriog R.D., Llangollen, Wrexham R.D.	Mixed	312	4.6	24.6 per cent
Eastern Area No. 2:				
Wrexham Borough	Industrial	200	5.5	24.0 per cent

ANNUAL REPORT OF ORGANISERS OF PHYSICAL EDUCATION FOR THE SCHOOL YEAR.

During the last three years a marked change has been observed in the development of the Physical Education lesson. Children are encouraged to develop their own initiative and skill and to improve on their own performance rather than in competition against other children in the class. In order to develop this method on sound lines every school needs a sufficient amount of small apparatus and teachers are encouraged to improvise to the best of their ability. Most schools are now adequately supplied with small balls, hoops, ropes, etc., and a number of schools have been supplied with fibre mats for agility work.

Two Infants' Schools in the Wrexham area have been supplied with the Portable Infants' Agility Apparatus approved by the Ministry of Education and it is hoped to increase this number in the next allocation. The apparatus in the Junior Schools now requires implementing by the addition of box horses, etc., so that due provision is made for the upper classes.

There has been a steady progress in the work throughout the County and teachers have co-operated with the Organisers and worked with enthusiasm and interest.

A further allocation of gym shoes was made by the Committee—these were distributed to all schools needing replacements for worn out pairs. The number supplied is still insufficient for every school to receive its necessary quota and children have to take part in the Physical Education lesson in heavy boots which handicap the work considerably.

Courses.

Demonstration classes for Infants' teachers were held at Colwyn Bay and Ruthin. Children from local schools took part in these classes and emphasis was laid on the improvisation of apparatus suitable for the Infants' age group. These courses were visited by Mr. Pugh, H.M.I.; Mr. Haydn Davies, H.M.I., and Miss Hopkin-Jones, H.M.I.

A One-day School for women teachers in the Secondary Modern Schools was held at Howells School, Denbigh, and

teachers observed work taken for the Secondary Modern age range. Miss Hopkin-Jones, H.M.I., visited this Course and led a discussion on the modern informal method following these demonstrations.

Accommodation.

The work of resurfacing school yards in immediate need of attention is gradually being completed—this is an urgent matter for Primary Schools where no indoor accommodation is available, and the Physical Education lesson has to be abandoned during inclement weather owing to the state of the playground.

There are still a few schools in urgent need of playing fields; the children are handicapped in their training for athletic meetings and from participating in outdoor games. The maintenance of **existing** playing fields is always a source of worry to the Head Teachers. We feel very strongly that some scheme for the general maintenance of those fields should be devised. The purchase of a gang-mower with the appointment of a peripatetic groundsman as mentioned in our previous report, would meet the case for East and West Denbighshire. Similar schemes are already in operation in other rural counties.

Folk Dancing.

Interest in Folk dancing is developing rapidly both in Schools and Clubs throughout the County. A number of schools now include Folk Dance as part of their Physical Education Syllabus particularly during the winter months, and Folk Dance is often included as a competition in Schools Eisteddfodau. Four schools entered teams for the National Eisteddfod at Llanrwst and two gained places on the Stage out of 12 entries in the final competition. It is hoped to arrange a Course in the Wrexham area during the Autumn term for teachers and Youth Leaders and the Woman Organiser will include Folk Dances in the Courses for teachers which will commence in September and continue throughout the County during the year.

A number of teachers from the County attended the Residential Course organised by the Welsh Folk Dance Society held at Pantyfedwyn, Borth, Aberystwyth, during the Easter holidays.

Youth Work.

P.T. Competition.—An Inter-club Competition for boys was held again this year. The Colwyn Bay Friendship Club were again the winners and represented the County in the Competition at the National Eisteddfod at Llanrwst.

Athletics.—The Annual Denbighshire Youth Athletic Meeting was held at the Barracks Field, Wrexham, and despite bad weather a full programme of events for boys and girls was completed. The number of competitors was disappointing but the keen interest shown by those who attended was most gratifying.

The Organisers spent a week at the Annual Youth Camp at Colwyn Bay and the Woman Organiser was in sole charge of the girls' section at the Grammar School. A most enjoyable and beneficial week was spent by all attending the Camp.

Athletics and Games.

The standard of Athletics in the Schools is being raised very steadily through the enthusiastic support of a very large number of Primary and Secondary School teachers. Junior and Senior Associations have been formed to promote the practice of Athletics in schools and each year new names appear in the lists of competing schools.

At the County Meeting there was a decided improvement in the standard of performance in the girls' events. The award of a Trophy for the Modern Schools has been a worthwhile innovation.

At the Annual National Championship Meeting held at the Maindy Stadium, Cardiff, Denbighshire represented by 39 boys from 13 schools (4 Modern, 6 Grammar Schools, Technical College, Rydal and Lindisfarne) occupied third place. Six 1st places and Standards in all but four events were gained and one member of the Team created a new National Record. Also, three of the Denbighshire team have been invited to the "News Chronicle" Track and Field Training Centre early next year.

It is hoped to arrange a Junior School Athletic meeting in the Colwyn Bay and Abergelle district next year.

ACHIEVEMENTS OF DENBIGHSHIRE ATHLETIC ASSOCIATIONS.

Name of Association.	No. of Schools partici- pating	No. of Com- petitors	Trophies.
Vale of Clwyd Athletic Association ...	28	878	Solly Hyman Challenge Shield. Borthyn N.P. School. Evan Roberts Challenge Cup. Rhewl Council School. T. J. Roberts Shield. Brynhyfryd Grammar School Certificate of Merit. Gyffylliog Council School.
Wrexham Junior Schools	28	819	Ald. Hanson Cup. Victoria Council School. Association Cup. Gwersyllt N.P. School. F. F. Crane Cup. Rossett Controlled School.
Wrexham Senior Scholars	19	541	Girls Competition. Brynteg Modern. Boys Competition. Rhos Modern. All-age Schools. Rossett Controlled.
Denbighshire Sec. Schools Athletic Association ...	30	574	Boys Senior—Rydaŷ School. Middle—Grove Park. Junior—Grove Park. Aggregate—Grove Park. (R. F. Watkins Shield). Girls Brynhyfryd Grammar. (Wm. Aston Shield). Modern Schools. Boys: Colwyn Bay. Girls: Cledfryn, Denbigh. (C. R. Tucker Cup).

In addition to the above tabulation many Junior Schools now include a Sports Day in their Summer Programme.

Hockey.

The Denbighshire Schoolgirls Hockey team did well this season and won the North Wales Tournament played at Hawarden in February. They were victorious over their old rivals, Flintshire in their County match and won by 4 goals to nil.

Netball.

The County Netball Association has continued to flourish in its third year, and the standard of play in all schools has shown a marked improvement. Tournaments were held at Wrexham and Colwyn Bay and the winners in each area met at Denbigh for the County Championship. The Ethel Hovey Challenge Trophy for Seniors was won by the Caledfryn Modern School, Denbigh, who beat St. Mary's, Wrexham, in an exciting game. They also won the T. P. Roberts Challenge Cup for Juniors by beating St. Mary's Junior team.

The County team selected at Denbigh had a victorious season. They won the North Wales Tournament played at Rhyl and won their County matches against Flintshire, Caernarvonshire and Montgomeryshire. Four of the County team were selected to play in the North Wales team against S. Wales at Cardiff in a Festival of Britain Tournament and although the team were unsuccessful they much enjoyed the experience of travelling to Cardiff and playing against girls from the S. Wales schools.

Football.

The Wrexham Schools F.A. and the Vale of Conway League have continued to flourish. The Captain of the Welsh Schoolboys team was a Denbighshire boy from Gwersyllt Council School. Two boys from Grove Park Grammar School took part in the Youth International game. The Grammar Schools Football Competition was again played in two zones. A final match between the winners of the respective zones,

Brynhyfryd and Llanrwst, was played at Abergele where after an exciting game Llanrwst won by 3-2.

Swimming.

Facilities for Swimming Instruction in the County are limited owing to the lack of swimming baths; but where schools are able to attend provision should be made for instruction of scholars at the baths.

The County Certificates were awarded as follows :—

Wrexham	{Elementary	113
	{Proficiency	20
Colwyn Bay	{Elementary	58
	{Proficiency	35
	{Advanced	17

The increase in the number of pupils taking the Advanced Certificate is an indication of the steady progress in the standard of swimming.

Trophies.

C. R. Tucker, Esq.—two cups donated to the Denbighshire Secondary Schools Athletic Association.

C. P. Jones, Esq.—Challenge Cup, Denbighshire Grammar School Football Competition.

Councillor T. P. Roberts—Denbighshire Netball Association Junior Challenge Cup.

F. F. Crane, Esq.—Challenge Cup, Junior School Athletic Association, Wrexham Area.

We are grateful to these gentlemen for their very keen interest in the activities of the County.

The Organisers have served on various Committees, visited Youth Clubs, Women's Institutes and British Red Cross Societies. The Woman Organiser has acted as adjudica-

tor for Folk Dance at the International Eisteddfod at Llangollen and at other local Eisteddfodau and was responsible for the Flower Dance at the Gorsedd Ceremony at Llanrwst in August.

The Organisers would like to express their grateful thanks to the Director, his Deputy and the Office Staff for their consideration and helpfulness at all times and to the teachers of the County for their willing co-operation.

E. DANIELS JONES	{ Organisers of
R. G. HUGHES	
	{ Physical Education.

MEDICAL INSPECTION AND TREATMENT RETURNS.

Year ended 31st December, 1951.

TABLE I.

**Medical Inspection of Pupils Attending Maintained Primary
and Secondary Schools (including Special Schools).**

A.—Periodic Medical Inspections.

Number of Inspections in the prescribed Groups :—

Entrants	2478
Second Age Group	2438
Third Age Group	1371
Total	<u>6287</u>

Number of other Periodic Inspections 70

Grand Total 6357

B.—Other Inspections.

Number of Special Inspections	260
Number of Re-inspections	<u>970</u>
Total	<u>1230</u>

C.—Pupils found to require Treatment.

No. of Individual Pupils found at Periodic Medical Inspection
to require Treatment (excluding Dental Diseases and
Infestation with Vermin).

Group	For defective vision (ex squint).	For any of the other con- ditions recorded in Table IIA.	Total individual pupils.
(1)	(2)	(3)	(4)
Entrants	43	122	160
Second Age Group	117	112	225
Third Age Group	64	72	126
	—	—	—
Total (prescribed groups) .	224	306	511
Other Periodic Inspections .	6	14	15
	—	—	—
Grand Total	230	320	526
	—	—	—

TABLE II.

A.—Return of Defects found by Medical Inspection in the year ended 31st December, 1951.

Defect or Disease.	Periodic Inspections. No. of defects.		Special Inspections. No. of defects.	
	Requiring treatment.	Requiring to be kept under observation but not requiring treatment.	Requiring treatment.	Requiring to be kept under observation but not requiring treatment.
(1)	(2)	(3)	(4)	(5)
Skin	18	138	6	6
Eyes :				
(a) Vision	230	254	29	15
(b) Squint	43	61	8	5
(c) Other	18	33	—	1
Ears :				
(a) Hearing ..	8	52	—	3
(b) Otitis Media	3	9	—	—
(c) Other	6	16	1	2
Nose or Throat ...	174	1072	13	48
Speech	8	51	1	5
Cervical Glands ...	9	500	4	18
Heart and Circulation	4	108	1	5
Lungs	5	185	—	11
Developmental :				
(a) Hernia	6	8	—	—
(b) Other	1	5	—	—
Orthopaedic :				
(a) Posture ...	16	224	2	2
(b) Flat Foot ...	26	314	2	7
(c) Other	12	196	2	3

TABLE II(A) — cont.

Defect or Disease.	Periodic Inspections. No. of Defects.		Special Inspections. No. of Defects.	
	Requiring treatment.	Requiring to be kept under obser- vation but not re- quiring treatment.	Requiring treatment.	Requiring to be kept under obser- vation but not re- quiring treatment.
Nervous System:				
(a) Epilepsy ...	—	4	—	—
(b) Other	—	24	1	—
Psychological :				
(a) Develop- ment	—	18	—	11
(b) Stability ...	1	13	—	—
Other	2	96	6	14

**B.—Classification of the General Condition of Pupils inspected
during the year in the Age Groups.**

Age Groups.	Number of pupils inspected.	(A) Good		(B) Fair		(C) Poor	
		Number	% of col. 2	Number	% of col. 2	Number	% of col. 2
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
Entrants	2422	464	19.2	1888	77.9	70	2.8
Second Age Group	2423	711	29.3	1665	68.7	47	1.9
Third Age Group	1442	269	18.6	1161	80.5	12	.8
Other Periodic In- spections	70	23	32.8	43	61.4	4	5.7
Total ...	6357	1467	23.1	4757	74.8	133	2.1

TABLE III.

Infestation with Vermin.

(i)	Total number of examinations in the schools by the school nurses or other authorised persons	63482
(ii)	Total number of individual pupils examined	22584
(iii)	Total number of individual pupils found to be infested	1021
(iv)	Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2), Education Act, 1944)	—
(v)	Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3), Education Act, 1944)	—

TABLE IV.

Treatment of Pupils attending Maintained Primary and Secondary Schools (including Special Schools).

Group I.—Diseases of the Skin (excluding Uncleanliness, for which see Table III).

		Number of cases treated or under treatment during the year.	
		By the Authority	Otherwise
Ringworm:			
(i)	Scalp	—	—
(ii)	Body	2	—
Scabies		5	—
Impetigo		68	—
Other Skin Diseases		115	—
Total		190	—

Group 2.—Eye Diseases, Defective Vision and Squint.

	Number of cases dealt with	
	By the Authority	Otherwise
External and other, excluding errors of refraction and squint	8	84
Error of refraction (including squint) ...	158	340
Total	166	424

Number of pupils for whom spectacles
were:

(a) Prescribed	155	312
(b) Obtained	—	867
Total	155	1179

Group 3.—Diseases and Defects of Ear, Nose and Throat.

	Number of cases treated	
	By the Authority	Otherwise
Received operative treatment:		
(a) for diseases of the ear	—	32
(b) for adenoids and chronic tonsillitis	—	349
(c) for other nose and throat con- ditions	—	19
Received other forms of treatment	—	3
Total	—	397

Group 4.—Orthopaedic and Postural Defects.

(a) Number treated as in-patients in hospitals	59	
	By the Authority	Otherwise
(b) Number treated, e.g., in clinics or or out-patient departments	—	1142

Group 5.—Child Guidance Treatment.

	Number of cases treated In the Authority's Child Guidance Clinics Elsewhere	
Number of pupils at Child Guidance Clinic	99	—

Group 6.—Speech Therapy.

	Number of cases treated By the Authority Otherwise	
Number of pupils treated by Speech Therapists	2*	2

* By arrangement with the Salop County Council.

Group 7.—Other treatment given.

	Number of cases treated By the Authority Otherwise	
(a) Miscellaneous minor ailments	708	—
(b) Other than (a) above (specify), ear defects (wax, etc.)	79	—
Total	787	—

TABLE V.

**Dental Inspection and Treatment carried out
by the Authority.**

(1) Number of pupils inspected by the Authority's Dental Officers:—	
(a) Periodic age groups	11898
(b) Specials	1483
Total (1)	<u>13381</u>
(2) Number found to require treatment	6941
(3) Number referred for treatment	6743
(4) Number actually treated	6115
(5) Attendances made by pupils for treatment	7195
(6) Half-days devoted to:	
Inspection	116.5
Treatment	1061.5
Total (6)	<u>1178.0</u>
(7) Fillings:	
Permanent Teeth	3351
Temporary Teeth	255
Total (7)	<u>3606</u>
(8) Number of teeth filled:—	
Permanent Teeth	3081
Temporary Teeth	255
Total (8)	<u>3336</u>

(9) Extractions:

Permanent Teeth	1595
Temporary Teeth	11167
Total (9)	12762

(10) Administration of general anaesthetics for
extractions 4528

(11) Other operations:

Permanent Teeth	418
Temporary Teeth	211
Total (11)	629

SCHOOL HEALTH SERVICE AND SCHOOL CLINICS.

Return for 31st December, 1951.

I.—Staff of the School Health Service. (excluding Child Guidance).

School Medical Officer: Dr. M. T. Islwyn Jones.

Senior Dental Officer: Mr. D. Glen Thomson

	Number.	Aggregate staff in the service of the L.E.A. in terms of the equivalent number of whole-time officers.
(a) Medical Officers*:		
(i) Whole-time School Health Service	—	—
(ii) Whole-time School Health and Local Health Service	7	2.9
(iii) General Practitioners working part-time in the School Health Service	—	—
(b) Dental Officers	3	2.4
(c) Physiotherapists, Speech Therapists, etc. (specify)	—	—
(d) (i) School Nurses	15	9.0
(ii) No. of the above who hold a Health Visitor's Certificate ...	10	—
(e) Nursing Assistants	—	—
(f) Dental Attendants	4	3.2

* All Officers of the School Health Service (including the School Medical Officer and the Senior Dental Officer) other than those employed part-time for specialist examination and treatment only.

II.—Number of School Clinics.

(i.e., premises at which clinics are held for school children) provided by the Local Education Authority for the medical and/or dental examination and treatment of pupils attending maintained primary and secondary schools.

Number of School Clinics	10
Number of occasional clinics held for school children	9
	(at established Child Welfare Centres within the County)

III.—Type of Examination and/or treatment provided, at the School Clinics returned in Section II, either directly by the Authority or under arrangements made with the Regional Hospital Board for examination and/or treatment to be carried out at the Clinic.

Examination and/or Treatment.	Number of School Clinics (i.e., premises) where such treatment is provided.	
	Directly by the Authority.	Under arrangements with Regional Hospital Boards.
(1)	(2)	(3)
(a) Minor ailment and other non specialist examination or treatment	29	—
(b) Dental	29	—
(c) Ophthalmic *	5	—
(d) Ear, Nose and Throat	—	—
(e) Orthopaedic	—	4
(f) Paediatric †	—	—
(g) Speech Therapy	—	—
(h) Others (specify)	—	—

* Arrangements made with the Supplementary Ophthalmic Service should be returned in Column (2) and those made with the Hospital and Specialist Service in Column (3).

† Clinics for children referred to a specialist in children's diseases.

IV.—Child Guidance Centres.

A "Child Guidance Service" is provided by the Regional Hospital Board, from the Staff of the North Wales Hospital for Mental and Nervous Diseases, and four sessions are held weekly.

Details of Staff as per Table below:—

Staff of Centres.	(a) Number		(b) Aggregate on Forms of the equivalent in number of whole-time Officers	
	Colwyn Bay	Wrexham	Colwyn Bay	Wrexham
(a) Psychiatrists	1	1	2/11	2/11*
(b) Educational Psychologists	—	1	—	2/11
(c) Psychiatric Social Workers	1	1	2/11	2/11
(d) Others (specify)	—	—	—	—

* 11/11 are given to represent "full time" in the National Health Service.

Handicapped Pupils Requiring Education at Special Schools or Boarding in Boarding Homes.

	(1) Blind.	(2) Partially sighted.	(3) Deaf.	(4) Partially Deaf.	(5) Delicate.	(6) Physically Handicapped.	(7) Educationally Sub-normal.	(8) Maladjusted.	(9) Epileptic.	(10) TOTAL
In the calendar year ended 31st December, 1951:										
(a) Handicapped Pupils newly placed in Special Schools or Homes ...	1	—	1	—	1	1	9	—	1	14
(b) Handicapped Pupils newly ascertained as requiring education at Special Schools or boarding in Homes	2	1	—	2	3	11	24	—	—	43

Number of children reported during the year:

(a) Under Section 57 (3), excluding any re- turned under (b)	12
(b) Under Section 57 (3), relying on Section 57 (4)	—
(c) Under Section 57 (5) of the Education Act, 1944	—

Handicapped Pupils requiring Education at Special Schools or Boarding in Boarding Homes (continued).

	(1) Blind.	(2) Partially sighted.	(3) Deaf.	(4) Partially Deaf.	(5) Delicate.	(6) Physically Handicapped.	(7) Educationally Sub-normal.	(8) Maladjusted.	(9) Epileptic.	(10) TOTAL [(1) - (9)]
On or about December 1st, 1951:										
(c) Number of Handicapped Pupils from the area attending:										
(i) attending Special Schools as:										
(a) Day Pupils	—	—	—	—	—	—	19	—	—	19
(b) Boarding Pupils	2	—	14	3	—	—	10	—	4	33
(ii) Boarded in Homes	—	—	—	—	—	—	—	—	—	—
(iii) Attending independent schools under arrangements made by the Authority ...	—	—	—	—	—	—	2	—	—	2
Total (c)	2	—	14	3	—	—	31	—	4	54

Handicapped Pupils requiring Education at Special Schools or Boarding in Boarding Homes (continued).

(10) TOTAL
[(1) - (9)]

(d) Number of Handicapped Pupils
being educated under arrange-
ments made under Section 56 of
the Education Act, 1944:
(i) In Hospitals
(ii) Elsewhere

(e) Number of Handicapped Pupils
from the area requiring places in
Special Schools (including any
such unplaced children who are
temporarily receiving home
tuition)

Amount spent on arrangements under Section 56 of
the Education Act, 1944, for the education of
Handicapped Pupils in the financial year ended
31st March, 1951

£673

Return showing Independent Schools being assisted by the Local Education Authority under Section 9 (1) of the Education Act, 1944, in respect of Handicapped Pupils (see Manual of Guidance, Special Services No. 1).

Year ended 31st December, 1951.

Name and Address of School. (1)	State whether for Boys, Girls or both. (2)	Number of pupils whose fees are be- ing paid in whole or in part by the L.E.A. (3)	Category of handicap of pupils in Column (1). (4)	Age range of pupils in Column (3). (5)	Annual rate of payment by L.E.A. per pupil. (6)
Penlan Special School, Llaufwrog, near Ruthin.	Both.	2	Educationally Sub-normal.	9-14 years.	£190 0s. 0d.